

POSITION	ID NO.	DATE
CLASSIFIER	7	4-5-93
EXAMINER	5055	4-11-93
TYPIST	525	4-7-93
VERIFIER	V2564	4-11-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	2-28-93
2	3-14-93
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14	3-14-93
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SYMBOLS

- Rejected
- = Allowed
- (Through number) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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(LEFT INSIDE)